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Supervisor Gloria Molina
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FROM: J. Tyler McCauley 
Auditor-Controller

SUBJECT: **DEPARTMENT OF HEALTH SERVICES HARRIS-RODDE
SETTLEMENTS - AVERAGE LENGTH OF STAY AND EMERGENCY
DEPARTMENT BOARDING TIME REVIEW FOR QUARTERS ENDED
SEPTEMBER 2006 AND DECEMBER 2006**

At the request of the Department of Health Services (DHS), we reviewed LAC+USC Medical Center's (LAC+USC) progress in meeting the requirements of the Harris-Rodde lawsuit settlement for the quarters ending September 2006 and December 2006. Our review indicates that LAC+USC accurately reported meeting the requirements for the quarter ending December 2006. We could not determine if LAC+USC met the Emergency Department Boarding Time requirement for the quarter ending September 2006.

Background

In December 2005, the County settled lawsuits with plaintiffs Harris and Rodde regarding reducing beds at the LAC+USC replacement facility. Under the settlements, LAC+USC was allowed to immediately reduce 25 budgeted, non-psychiatric beds. LAC+USC is also allowed to reduce an additional 35 budgeted, non-psychiatric beds for each quarter LAC+USC reduces the Average Length of Stay (ALOS) by 0.3 days compared to the previous quarter (from an initial baseline of 6.5 days), and maintains a median Emergency Department Boarding Time (EDBT) under seven hours. The settlement agreements require the Auditor-Controller to verify the ALOS and EDBT when LAC+USC reports that they have met the targets.

Review of Reported ALOS

ALOS is the average time between when patients are admitted and when they are discharged from the hospital. LAC+USC records both admission and discharge on the Hospital's Affinity computer system (Affinity). For the quarters ending September 2006 and December 2006, LAC+USC reported an ALOS of 6.2 days.

We reviewed two separate random statistical samples (one for each quarter) of 30 records to determine if LAC+USC had accurately reported their ALOS. Our samples indicate that LAC+USC accurately reported the ALOS for the quarters ending September 2006 and December 2006.

Review of Reported EDBT

EDBT is the time between when a physician writes an order for a patient to be placed in an inpatient bed (pre-admit date/time) and when the patient is actually placed in the bed (ED discharge date/time). DHS and County Counsel advised us that, for purposes of verifying the reported EDBT, the pre-admit date/time should be taken from the pink copy of the Emergency Room (ER) Record (pink sheet). The ED discharge date/time is recorded in the patient's medical record. Both the pre-admit date/time and the ED discharge date/time are recorded on Affinity. For the quarters ending September 2006 and December 2006, LAC+USC reported a median EDBT of 6.4 hours and 4.8 hours, respectively.

Quarter Ended September 2006

We attempted to validate LAC+USC's reported median EDBT for the quarter ending September 2006. However, LAC+USC did not keep the pink sheets during this quarter. We tried to validate the EDBT for the quarter using other documents, which appeared to indicate a longer EDBT than shown on Affinity. However, DHS indicated that the EDBT entered into Affinity can only be validated using the pink sheets. As a result, we could not verify the accuracy of LAC+USC's reported EDBT for the quarter ending September 2006.

Quarter Ended December 2006

When we started our testwork in November 2006, we advised LAC+USC of the need to keep the pink sheets to allow us to validate the reported EDBT. DHS management advised us that they did not keep the pink sheets because they believe it would violate regulatory standards that prohibit "shadow" medical records. After discussions with County Counsel and DHS, it was determined that the facility should keep the pink sheets to help implement the settlement agreements and maintain an audit trail to corroborate the pre-admit date/time recorded on Affinity.

In our testwork for the quarter ended December 2006, we noted that LAC+USC only had completed pink sheets for 54% of the visits that were subject to the EDBT requirement. Forty-three percent of the pink slips were missing and three percent were incomplete. Eighty-nine percent of the missing pink sheets were for visits in October and November.

The first step in validating the reported EDBT was to ensure that LAC+USC had included all visits that are subject to the EDBT requirement. We tested a random statistical sample of 73 visits that were excluded from the median EDBT calculation, and confirmed that the visits were properly excluded from the calculation (e.g., patients who were not admitted as inpatients, or were admitted from an outpatient clinic).

We then reviewed a random statistical sample of 84 visits to verify the EDBTs reported on Affinity. We noted that the EDBT for 13 visits (15%) did not agree to the source documents we reviewed. Specifically:

- For nine visits (11%), the source documents we reviewed showed a longer EDBT than was recorded on Affinity. The EDBT on Affinity for these nine visits was understated by an average of 0.6 hours.
- For four visits (5%), the source documents we reviewed showed a shorter EDBT than was recorded on Affinity. The EDBT on Affinity for the four visits was overstated by an average of 7.08 hours.

None of these variances resulted in a material change in the reported median EDBT. Overall, our review of the 84 visits showed a median EDBT of 4.34 hours, compared to 4.37 hours recorded on Affinity. As a result, our review indicates that LAC+USC accurately reported the median EDBT for the quarter ended December 2006 for visits where the pink sheets were available.

DHS and LAC+USC management were very cooperative during our review and actively participated in the review process. Please call if you have any questions or your staff may contact Jim Schneiderman at (626) 293-1101.

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